N2100000 1532

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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

Innovative Community Outread NAME OF CORPORATION: N21000001532 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Herman McLean
(Name of Contact Per Innovative Community Outreach , Inc. (Firm Company) Miami, Florida 33169 (City/ State and Zip Code) mcleanhermanagmail com
F-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Herman Mclean JR at 786 277-2552 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

ININIVATIVE CON	mmunity Untreach I	OC.
(Name of Corporation as currently filed with the Flo		<u> </u>
NZIOUUC	00 1532	
	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts	the following
A. If amending name, enter the new name of the co	orporation:	
N/A		The new
name must be distinguishable and contain the word "company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "Corp	o." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	annees '	<u>e</u>
(Principal office address MOST BE A STREET ABD	MIAMI : F1 33169	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	N 17121 N.W. 9th Place Minmi, Fl 33169	e
	Miam, +1 33169	
D. If amending the registered agent and/or register new registered agent and/or the new registered of New Registered Agent:	office address:	
	17/21 NW 9th Mace	
New Registered Office Address:	(Florida street address)	
	Miami Florida 3	3169
_	(City) (Zip Code)	-
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position	on.
	NA	
	Signature of New Registered Agent, if changing	7021
		<u></u>
		021 (FF) 24 PH
		P
		ယ္

and address of each Of (Attach additional sheet: Please note the officer/d P = President: V = Vice	Ger and/or Directs, if necessary) Irector title by the President; T= Tre = Chief Financial	ctor being added: first letter of the office title: asurer; S= Secretary; D= Directo Officer. If an officer/director hol	or; TR= Trustee: C = Chairman or Clerk; CEO = Chief ds more than one title, list the first letter of each office
Changes should be noted a change, Mike Jones le Mike Jones, V as Remov	aves the corporation	on, Sally Smith is named the V and	sted as the PST and Mike Jones is listed as the V. There is A S. These should be noted as John Doe, PT as a Change.
Example: X Change X Remove X Add	PT John I V Mike J SV Sally S	lones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	NA	<u> </u>	MA
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add	<u></u>		
Remove			
6) Change Add			
Remove			
E. If amending or add (attach additional she		ticles, enter change(s) here: (Be specific)	
	/A		
	·		

The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: (1) - 10 - 202
Effective date if applicable: 06-10-2021 (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

Dated 06-10-2021
Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or
other court appointed fiduciary by that fiduciary)
Herman Melean (Typed or printed name of person signing)
Aesident

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.